

Fill in this information to identify the case:

Debtor Acis Capital Management, L.P.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 18-30264-sgj11
(if known)

☒ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number _ _ _ _

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)()

Debtor **Acis Capital Management, L.P.**Case number (if known) **18-30264-sgj11****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">3.1</div> Nonpriority creditor's name and mailing address <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Andrews Kurth Kenyon LLP</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">600 Travis, Suite 4200</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> Houston TX 77002 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Date or dates debt was incurred</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal fees Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">\$211,088.13</div>
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">3.2</div> Nonpriority creditor's name and mailing address <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Case Anywhere LLC</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">21860 Burbank Blvd., Suite 125</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> Woodland Hills CA 91367 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Date or dates debt was incurred</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <div style="border-bottom: 1px solid black; margin-bottom: 5px;">-</div> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">\$417.20</div>
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">3.3</div> Nonpriority creditor's name and mailing address <div style="border-bottom: 1px solid black; margin-bottom: 5px;">CSI Global Deposition Services</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">4950 N. O'Connor Rd., Suite 152</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> Irving TX 75062-2778 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Date or dates debt was incurred</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <div style="border-bottom: 1px solid black; margin-bottom: 5px;">-</div> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">\$38,452.56</div>
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">3.4</div> Nonpriority creditor's name and mailing address <div style="border-bottom: 1px solid black; margin-bottom: 5px;">CT Corporation</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">PO Box 4349</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> Carol Stream IL 60197-4349 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Date or dates debt was incurred</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <div style="border-bottom: 1px solid black; margin-bottom: 5px;">-</div> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">\$517.12</div>

Debtor **Acis Capital Management, L.P.**Case number (if known) **18-30264-sgj11****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.5</div> Nonpriority creditor's name and mailing address David Langford 1321 Indian Creek DeSoto TX 75115 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: - Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,500.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.6</div> Nonpriority creditor's name and mailing address David Simek 31 Woodacres Rd. Brookville NY 11545 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: - Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,233.19
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.7</div> Nonpriority creditor's name and mailing address Drexel Limited 309 23rd St., #340 Miami Beach FL 33139 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: - Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,359.96
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.8</div> Nonpriority creditor's name and mailing address Elite Document Technology 400 N. Saint Paul St., Suite 1300 Dallas TX 75201 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: - Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$199.72

Debtor **Acis Capital Management, L.P.**Case number (if known) **18-30264-sgj11****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.9</div> Nonpriority creditor's name and mailing address <u>Highfield Equities, Inc.</u> <u>3131 McKinney Ave., Suite 215</u> <u>Dallas TX 75204</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,510.04</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.10</div> Nonpriority creditor's name and mailing address <u>Highland Capital Management, L.P.</u> <u>300 Crescent Court, Suite 700</u> <u>Dallas TX 75201</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$2,770,731.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.11</div> Nonpriority creditor's name and mailing address <u>JAMS, Inc.</u> <u>18881 Von Karman Ave., Suite 350</u> <u>Irvine CA 92612</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,352.27</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.12</div> Nonpriority creditor's name and mailing address <u>Jones Day</u> <u>2727 N. Harwood St.</u> <u>Dallas TX 75201</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$368.75</u>

Debtor **Acis Capital Management, L.P.**Case number (if known) **18-30264-sgj11****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.13</div> Nonpriority creditor's name and mailing address <u>Joshua Terry</u> <u>25 Highland Park Village</u> <u>Suite 100-848</u> <u>Dallas TX 75205-2726</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,949,749.15</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.14</div> Nonpriority creditor's name and mailing address <u>KPMG LLP (USA)</u> <u>Two Financial Center</u> <u>60 South St.</u> <u>Boston MA 02111</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$34,000.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.15</div> Nonpriority creditor's name and mailing address <u>Lackey Hershman LLP</u> <u>3102 Oak Lawn Ave., Suite 777</u> <u>Dallas TX 75219</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$236,977.54</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.16</div> Nonpriority creditor's name and mailing address <u>McKool Smith, P.C.</u> <u>300 Crescent Court, Suite 1500</u> <u>Dallas TX 75201</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$70,082.18</u>

Debtor **Acis Capital Management, L.P.**Case number (if known) **18-30264-sgj11****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.17</div> Nonpriority creditor's name and mailing address <u>Reid Collins & Tsai, LLP</u> <u>Building C, Suite 300</u> <u>1301 S. Capital of Texas Highway</u> <u>Austin TX 78746</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$17,383.75</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.18</div> Nonpriority creditor's name and mailing address <u>Stanton Advisors LLC</u> <u>300 Coles St., Apt. 802</u> <u>Jersey City NJ 07310</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$10,000.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.19</div> Nonpriority creditor's name and mailing address <u>Stanton Law Firm</u> <u>9400 N. Central Expwy, Suite 1304</u> <u>Dallas TX 75231</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$88,133.99</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.20</div> Nonpriority creditor's name and mailing address <u>The TASA Group, Inc.</u> <u>1166 DeKalb Pike</u> <u>Blue Bell PA 19422-1853</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$14,530.54</u>

Debtor Acis Capital Management, L.P.Case number (if known) 18-30264-sgj11**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$0.00

5b. Total claims from Part 2

5b. + \$11,457,587.09

5c. Total of Parts 1 and 2

5c. \$11,457,587.09

Lines 5a + 5b = 5c.

Fill in this information to identify the case and this filing:

Debtor Name Acis Capital Management, L.P.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number (if known) 18-30264-sgj11

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

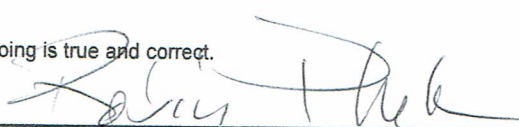
I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☒ Amended Schedule E/F
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/13/2019
MM / DD / YYYY

X 
Signature of individual signing on behalf of debtor

Robin Phelan

Printed name

Chapter 11 Trustee

Position or relationship to debtor